PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
Effective October 1, 2000 046601 - 5090														
. CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			22				ſ	RATE		FEE]	RATE	FEE	
FOR			NUMBER FILED		NUME	IMBER EXTRA		BASIC F	EE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			22minus 20=		*	8		X\$ 9=			OR	X\$18=	36	
INDEPENDENT CLAIMS			minus 3 =		• 4			X40=			OR	X80=	320	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=			1	+270=	500	
* If	the difference	in column 1 is	less than zero, enter "0" in o			column 2					OR	TOTAL	10/6	
CLAIMS AS AMENDED - PART II								IOIA	L		OR	OTHER	THAN	
(Column 1) (Column						(Column 3)		SMAL	L E	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	: T	ADDI- FEE		RATE	ADDI- TIONAL FEE:	
NON	Total		Minus	**		91 =		X\$ 9=	τ <i>π</i> ,		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=	1	•	OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	+135=	\top			+270=		
							L	TOTA			OR	TOTAL		
	(Column 1) (Column 2) (Column 3)								E		OR	ADDIT. FEE		
_		CLAIMS		HIGH	EST	(Column 3)	lг		_T	ADDI-			ADDI	
MENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE		IONAL FEE		RATE	ADDI- TIONAL FEE	
QN.	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
AMENDI	Independent	* NTATION OF MU	Minus	***	- CL A134	=		X40=			OR	X80=		
L	FINOT PRESE	NTATION OF MIC	JUIPLE DEF	ZENDENT	CLAIM		'	+135=			OR	+270=		
							A	TOTA			OR	TOTAL ADDIT. FEE		
						,	,,							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE [']	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	T		OR	X\$18=		
	Independent	*	Minus	***		=	╽┟	X40=	╁		- 1	X80=	-	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l ├		╀		OR	\00=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
	The "Highest Num	ber Previously Pai	d For" (Total or	r Independe	ent) is the	highest numbe	r foun	nd in the a	appro	priate box	in col	umn 1.		